PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(703) 746-4000 or Fax

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

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7590

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

(Depositor's name) (Signature (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/672,146	09/28/2000	Chikao Nishino	IWA-126-USAP	6822

TITLE OF INVENTION: ALKYLENEDIAMINE DERIVATIVE ANTI-ULCER DRUG AND ANTIBACTERIAL DRUG

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	МО	\$1330	\$0	\$1330	07/23/2004
EXAMINER COVINGTON, RAYMOND K		ART UNIT	CLASS-SUBCLASS]	
		1625	514-331000	_	

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

_lSnider & Associates 2Ronald R. Snider

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Shiseido Co., Ltd.	Tokyo, Japan				
Please check the appropriate assignee category or category	ries (will not be printed on the patent); 🔾 individual 💥 corporation or other private group entity 🔾 government				
4a. The following fee(s) are enclosed:	4b. Payment of Fee(s):				
XX Issue Fee	XX A check in the amount of the fee(s) is enclosed.				
☐ Publication Fee	☐ Payment by credit card. Form PTO-2038 is attached.				
XM Advance Order - # of Copiesfive (5	XD The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-2816 (enclose an extra copy of this form).				
Director for Patents is requested to apply the Issue Fee ar	d Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.				
(Authorized Signature) Reg.	# (Date) 06-02-2004				

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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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06/04/2004 KALI22 00000018 09672146 01 FC:1501

1330.00 OP 02 FC:8001 15.00 OP.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Serial No.: 09/672,146

Confirmation No.: 6822

Reissue Application of US Patent No. 5,814,634 issued on September 29, 1998

Applicant: Chikao Nishino et al.

Art Unit: 1625

Filed: September 28, 2000

Examiner: Covington, Raymond K

Docket No: IWA-126-USAP

Customer No: 28892

For: Alkylenediamine Derivative, Anti-Ulcer Drug, and Antibacterial

Drug

TRANSMITTAL OF ISSUE FEE

US Patent & Trademark Office 2011 South Clark Place Customer Window, Mail Stop: <u>ISSUE FEE</u> Crystal Plaza Two, Lobby, Room 1B03 Arlington, VA 22202

Sir:

Attached for filing in the above-captioned matter is the Issue Fee Transmittal (Form PTOL-85B), and our check in the amount of \$1,345.00 for the Issue Fee (1,330.00) and an Advanced Order of five (5) patent copies (15.00). The Commissioner is hereby authorized to charge any deficiency or credit any overpayment to Deposit Account 19-2816. A duplicate copy of this Transmittal is attached.

Respectfully submitted,

Ronald R. Snider

Reg. No. 24,962

Date: June 2, 2004

Snider & Associates Ronald R. Snider P.O. Box 27613 Washington, D.C. 20038-7613 (202) 347-2600

RRS/jt